

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
(Schedule E)PAGE 1 OF 2  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Conservative Solutions PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00541292	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Chris Mottola Consulting, Inc.</b>			Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 22 / 2016</b>		
Mailing Address 4130 Cahuenga Blvd., 230a			Amount <b>5206.08</b>		
City North Hollywood	State CA	Zip Code 91602	Transaction ID : <b>SE.6000</b>		
Purpose of Expenditure media production-nationally disseminated, also opposed Trump and Cruz		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate Marco Rubio		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought		<b>0.00</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <b>First Tuesday Strategies, LLC</b>			Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 22 / 2016</b>		
Mailing Address 1301 Gervais Street Suite 520			Amount <b>819.30</b>		
City Columbia	State SC	Zip Code 29201	Transaction ID : <b>SE.5979</b>		
Purpose of Expenditure voter contact-telephone calls		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate Marco Rubio		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NV</b>		
Calendar Year-To-Date Per Election for Office Sought		<b>0.00</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>6025.38</b>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Nancy H. Watkins

[Electronically Filed]

Date

MM / DD / YYYY  
**02 / 23 / 2016**

Signature